ACTIVITY SECURITY CHECKLIST Irregularities discovered will be promptly reported to the designated Security Office for corrective action.									DIVISION/BRANCH/OFFICE												R	ROOM NUMBER					MONTH AND YEAR					
									Statement I have conducted a security inspection of this work area and checked all the items listed below.																							
ТО	FRC	OM						20.10			-	.,		THR				.			.				.00.0	0.01.	-					
ITEM	3	4	5	6	7	8	9	10) 11 12 13 14					16	 17 18 19 20 2				21	21 22 23 24 25 2				26	26 27 28 29 30 31				21			
Security containers have been locked and checked.	1	2	3	4	5	0	,	0	9	10	11	12	13	14	15	10	17	10	19	20	21	22	23	24	25	20	21	20	29	30	31	
Desks, wastebaskets and other surfaces and receptacles are free of classified material.																																
Windows and doors have been locked (where appropriate)																																
Typewriter ribbons and ADP devices (e.g., disks, tapes) containing classified material have been removed and properly stored.																																
Security alarm(s) and equipment have been activated (where appropriate).																																
INITIAL FOR DAILY REPORT																																
TIME																																